

A. GENERATOR INFORMATION

1. Generator Seattle City Light
 Address 1015 3rd Ave Rm. 922
 City/State Seattle, WA ZIP 98104
 Tech. Contact Shirli Axelrod TEL (206) 684-3568
 U.S. EPA IDENTIFICATION NUMBER
WA0980726384

2. Billing/Broker G.L. Construction
 Address 8040 S.E. 36th St.
 City/State Mercer Island, WA ZIP 98040
 Billing Contact Kamel Lekhakut TEL (206) 232-3390

Envirosafe Services Only

Application #
 WPQ
 CUST # 0
☐ DIRECT ☐ ACES
☐ BILLING ☐
☐ BROKER
 Sales Zone Code
 TAX ☐ YES ☐ NO
 MANIFEST CERTIFICATION REQUIRED ☐

B. WASTE STREAM — USE SEPARATE QUESTIONNAIRE FOR EACH CATEGORY IN SECTIONS 1-12**NOTE: ANY LIQUIDS BELOW 500 PPM MUST HAVE A LAB ANALYSIS OF MATERIAL PRIOR TO ANY TREATMENT.**

<input type="checkbox"/> 1. Transformer Below 500 PPM <input type="checkbox"/> Full <input type="checkbox"/> Drained	<input type="checkbox"/> 2. Transformer Above 500 PPM <input type="checkbox"/> Full <input type="checkbox"/> Drained <input type="checkbox"/> Drained and Flushed
<input type="checkbox"/> 3. Liquid — Above 500 PPM - Flash Point Above 200 °F. Type of Flushate _____	<input type="checkbox"/> 4. Liquid — Above 500 PPM - Flash Point Below 200 °F. Type of Flushate _____
<input type="checkbox"/> 5. Liquid — Below 500 PPM - Flash Point Above 200 °F Type of Flushate _____	<input type="checkbox"/> 6. Liquid — Below 500 PPM - Flash Point Below 200 °F. Type of Flushate _____
<input type="checkbox"/> 7. Capacitor — Large (over 3 lbs. of Liquid or 100 cu. in.) All large capacitors are incinerated. Are They Leaking <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 8. Capacitors — Small (Less than 3 lbs. of Liquid or 100 cu. in.) Incineration <input type="checkbox"/> Landfill <input type="checkbox"/> Are They Leaking <input type="checkbox"/> Yes <input type="checkbox"/> No
<input checked="" type="checkbox"/> 9. PCB Solids <input type="checkbox"/> Dirt - Soil - & Debris <input type="checkbox"/> Clothing, Rags, Etc.. <input type="checkbox"/> Empty PCB Container <input checked="" type="checkbox"/> Other <u>Fluor-Dry and Bunker Oil</u>	<input type="checkbox"/> 10. PCB Lab Pack Type of Containers in the Drum _____
<input type="checkbox"/> 11. Articles — Liquids Below 500 PPM Specific Type and Explain _____ Sealed Unit <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> 12. Articles — Liquids Above 500 PPM Specific Type and Explain _____ Sealed Unit <input type="checkbox"/> Yes <input type="checkbox"/> No

C. GENERAL INFORMATION

1. Process generating this waste Bunker oil was contaminated with PCB from unknown source
 2. Present volume 900 Gal Month of shipment (If generic write "ongoing") _____
 3. Liquids No ☒ (Check no or complete the following): Viscosity: Low ☐ Medium ☐ High ☐
 Materials other than PCB oil: H₂O _____% Solids _____% Other _____% (Specify)
 4. Does this material contain radioactive, pyrophoric, shock sensitive, or explosive materials?
 Yes ☐ No ☒
 5. Have any of the materials come in contact with or do they contain any RCRA regulated materials?
 Yes ☐ No ☒ Note: If yes, please explain on a separate sheet and submit a RCRA WPQ also.
 6. (A) Is this waste regulated under a Land Disposal Ban as promulgated in CFR 40 part 268?
 Yes ☐ No ☒
 (B) If A. was answered yes; is this waste currently allowed to be Land Disposed under a regulatory Variance or Exception?
 Yes ☐ No ☐
 7. Is this material the result of a spill? NO (Indicate spill material on PCB Control Sheet).
 8. Has this waste been treated by:
☒ Solidification (solely using absorbents)
☐ Stabilization (irreversible chemical transformation or encapsulation)
☐ Not Applicable
 9. If solidified, list all the absorbents used: Floor Dry
 10. If stabilized, list all the stabilization additives used: _____
 11. Does this waste pass the EPA specified Paint Filter Test?
 Yes ☒ No ☐
 12. If this waste has been stabilized, have you demonstrated that chemical stabilization will occur or that the stabilized waste will meet 50 PSI Unconfined Compressive Strength (ASTM D2166)? If yes, attach demonstration data.
 Yes ☐ No ☐ Not Applicable ☒

SCL 04163

CTY0049169

SEA289648

D. SHIPPING AND HANDLING INFORMATION:

1. D.O.T. Hazardous Material? Yes ☒ No ☐ 2. D.O.T. RQ Required: ☐ Yes ☒ No ☐ N/A
3. Proper D.O.T. Shipping Name: Hazardous Substance Solid N.O.S
4. D.O.T. Hazard Class: ORM-E 5. D.O.T. ID Number: NA 7185
6. Additional D.O.T. Description: P.C.B.
7. Type of Container: Drum ☒ Bulk Truck ☐
Other (specify) _____
D.O.T. Container Specification: 17 H
8. Projected Volume: _____ Tons _____ Gallons _____ Cubic Yards 20 Drum(s)
_____ Other (Explain) _____
per ☒ One Time _____ Week _____ Month _____ Quarter _____ Year

9. Comments/Special Handling: _____

E. GENERATOR CERTIFICATION

CERTIFICATION OF LIQUIDS TREATMENT (for all non-liquid bulk wastes).

- A. This waste stream is being shipped as: ☒ Drummed Material ☐ Containerized Material ☐ Not Applicable
B. This waste stream is being shipped as: ☐ Bulk Material (Respond to the following statements)
☐ Not Applicable (Go to Signature Section)

The waste was:

- C1. ☐ generated as a solid material containing no free liquids
— OR —

- C2. ☐ generated as a bulk liquid or hazardous waste containing free liquids
AND

☐ The Waste has been treated to eliminate free liquids in compliance with Section 3004 (c) of the Resource conservation and Recovery Act (RCRA) of 1976, as amended by the Hazardous and Solid Waste Amendments of 1984.

AND

☐ The treatment process utilized did not employ the addition of absorbents to the waste (unless used in a stabilization process).

AND

☐ The materials used in the treatment process do not biodegrade or release liquids when compressed.

PCB MATERIALS MUST BE SHIPPED IN ACCORDANCE WITH D.O.T. REGULATIONS AS SPECIFIED IN 49 CFR 100-177, AND PACKAGED IN ACCORDANCE WITH EPA REGULATIONS AS SPECIFIED IN 40 CFR PART 761. PLEASE SEE ATTACHED SHEET.

GENERATOR CERTIFICATION STATEMENT

I hereby certify that as an authorized representative of the generator named above, all information submitted in this and all the attached documents is true and accurate. To the best of my knowledge, all known and suspected hazardous components have been included in this document. All material and packaging will comply with all current regulations

Signature Shirli Axelrod Title Env. Analyst Date 3-1-89
Name SHIRLI AXELROD
(Please Type or Print)

ESII USE ONLY

Initial Review _____ Technical Review _____ Final Review _____
Date Approved _____ Date Denied _____ Compatability _____

Treatment/Disposal Routing _____

W.P.G. STATUS: ☐ APPROVED ☐ DENIED

Date _____

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